



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF OHIO**

**In re:** \_\_\_\_\_ ) **Judge Russ Kendig**  
\_\_\_\_\_ )  
\_\_\_\_\_ ) **Case No.** \_\_\_\_\_  
\_\_\_\_\_ )  
**Debtor(s).** \_\_\_\_\_ ) ☐ **Chapter 13 Form Plan Summary**  
\_\_\_\_\_ ) ☐ \_\_\_\_\_ **Amended Chapter 13 Plan**

**Read this carefully.** You are a party in interest in this bankruptcy case. This is a summary based upon a form plan adopted in this court. The full length form controls over the terms of this summary. Special Provisions (paragraph 1) are deviations from the form and should be read with special care. You may review the form plan at [www.ohnb.uscourts.gov](http://www.ohnb.uscourts.gov). The letters and numbers in parentheses in this plan summary are the paragraphs of the Form Plan into which the data would be inserted.

**1. SPECIAL PROVISIONS:**

- ☐ Continued on attached separate page(s).
2. \_\_\_\_\_ % or a pot of \$ \_\_\_\_\_ to general unsecured creditors (E9)
3. Assumed unexpired leases and executory contracts (B2)

<u>Creditor</u>	<u>Description of asset or contract</u>
_____	_____
_____	_____
_____	_____

- ☐ Continued on attached separate page(s).
- All other leases and executory contracts deemed rejected.

**4. Mortgages or Judgment Liens - Ongoing Monthly Payment (C, E3, E6)**

<u>Creditor</u>	<u>Priority</u>	<u>Property Address</u>	<u>Proposed Pymt/Mo.</u>	<u>To be paid by debtor, trustee, or stripped &amp; not secured</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- ☐ Continued on attached separate page(s).

5. Mortgage Arrears (E4)

<u>Creditor</u>	<u>Estimated Amount</u>	<u>Rate (%)</u>
_____	_____	_____%
_____	_____	_____%
_____	_____	_____%

☐ Continued on attached separate page(s).

**Creditors who do not agree to rate of interest must object to confirmation or the rate in this paragraph is deemed to be absolute on confirmation. The amount of arrearage is subject to contrary proof of claim.**

6. Secured Non-mortgage claims to be paid full current balance (E5)

Creditor: \_\_\_\_\_

Collateral: \_\_\_\_\_

Date Incurred: \_\_\_\_\_

Monthly Payment: \_\_\_\_\_

Interest Rate: \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_%

Estimated Balance: \_\_\_\_\_

Paid By: \_\_\_\_\_

☐ Continued on attached separate page(s).

7. Liens to be crammed down but not stripped (E7)

Creditor: \_\_\_\_\_

Date Incurred: \_\_\_\_\_

Collateral: \_\_\_\_\_

Monthly Payment: \_\_\_\_\_

Interest Rate: \_\_\_\_\_% \_\_\_\_\_% \_\_\_\_\_%

Secured Value: \_\_\_\_\_

☐ Continued on attached separate page(s).

**Creditors who do not agree to date incurred, collateral description, monthly payment, interest rate or secured value must object to confirmation or the treatment in this paragraph is deemed to be absolute upon confirmation, except statutory tax liens, which will be paid as allowed.**

8. Priority Claims to be paid in full and estimated as follows (E8)

<u>Creditor</u>	<u>Source &amp; Year</u>	<u>Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

☐ Continued on attached separate page(s).

9. The holder(s) of any claim for Domestic Support Obligations pursuant to 11 U.S.C. § 1302(d) shall be paid by the debtor unless specified in Special Provisions. The holder of the Domestic Support Obligation is specified below. If the holder of a claim is a minor, the name and address of such minor has been disclosed to the Trustee contemporaneously with the filing of this plan in compliance with 11 U.S.C. § 112. (B6)

Holder Name: \_\_\_\_\_

Holder's Address (if known): \_\_\_\_\_

Address of Child Support \_\_\_\_\_

Enforcement Agency (mandatory): \_\_\_\_\_

☐ Continued on attached separate page(s).

10. Payments to Trustee (D)

The debtor will pay to the trustee \$ \_\_\_\_\_ monthly for a minimum of \_\_\_\_\_ months, or all future disposable income, whichever is greater. Payments shall be by Wage Order on employer by Debtor ("Private Pay") in the form of money order or certified check.

11. Attorneys Fees are pursuant to the current Administrative Order. Any deviation is in Special Provisions. (E2)

Debtor's signature - name typed below

Debtor's signature - name typed below

\_\_\_\_\_

\_\_\_\_\_

Attorney's signature - Name (state bar #), address and phone typed below

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION**

<b>IN RE:</b>	<b>Jeffrey J. Null</b>	<b>:</b>	<b>CHAPTER 13 PROCEEDING</b>
	<b>Lindsay J. Null</b>	<b>:</b>	
		<b>:</b>	<b>CASE NO. 17-62502</b>
	<b>Debtor(s)</b>	<b>:</b>	
		<b>:</b>	<b>CHIEF JUDGE RUSS KENDIG</b>
		<b>:</b>	
		<b>:</b>	

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**NOTICE OF HEARING ON CONFIRMATION  
OF PLAN AND FIXING LAST DATE TO FILE OBJECTIONS**

The Debtor(s) has(ve) filed a Second Amended Plan with the Court and hereby give notice that:

A hearing on the Confirmation of said Second Amended Plan will be held on **May 23, 2018 at 2:00 pm** in the Ralph Regula US Courthouse, 401 McKinley Ave., S.W., Canton, Ohio 44702.

Any objections to said First Amended Plan shall be in writing and must be filed with the Court, Counsel for the Debtor(s), and the Chapter 13 Trustee no later than five (5) working days prior to said hearing, which is May 16, 2018.

Submitted by,

/s/ James R. Galehouse  
James R. Galehouse (0084867)  
Rauser & Associates  
401 W. Tuscarawas Ave, Suite 400  
Canton, OH 44702  
(330) 456-6505  
(330) 456-6506 Fax  
Counsel for Debtors

### **CERTIFICATE OF SERVICE**

I, James R. Galehouse, hereby certify that the foregoing Notice was electronically transmitted on or about April 25, 2018, via the Court's CM/ECF system to the following who are listed on the Court's Electronic Mail List.

- James R. Galehouse    jgalehouse@ohiolegalclinic.com,  
jamesgalehouse@yahoo.com;nkrenisky@ohiolegalclinic.com;rausermail@ohiolegalclini  
c.com;jrauser@ohiolegalclinic.com;rauserlaw@gmail.com;rauser@bestclientinc.com;rau  
serandassociates@gmail.com
- Toby L. Rosen    trosen@chapter13canton.com, trosen@ecf.epiqsystems.com
- United States Trustee    (Registered address)@usdoj.gov

I further certify that the following received notice by regular US mail at the specified address on the date first set forth above:

**Debtor(s)**

Jeffrey & Lindsay Null  
8955 Beatty St. NW  
Massillon, OH 44646

**Creditors**

All creditors attached below.

/s/ James R. Galehouse  
James R. Galehouse (0084867)

Label Matrix for local noticing  
0647-6  
Case 17-62502-rk  
Northern District of Ohio  
Canton  
Fri Feb 16 11:32:05 EST 2018

Capital One Bank  
PO Box 30285  
Salt Lake City, UT 84130-0285

Ditech Financial LLC fka Green Tree Servicing  
P.O. Box 6154  
Rapid City, South Dakota 57709-6154

Navient Solutions, LLC. on behalf of  
Department of Education Loan Services  
PO BOX 9635  
Wilkes-Barre, PA 18773-9635

Lindsay J. Null  
8955 Beatty St. NW  
Massillon, OH 44646-1275

United States Bankruptcy Court  
Ralph Regula U.S. Courthouse  
401 McKinley Avenue SW  
Canton, OH 44702-1745

Ditech Financial  
P.O. Box 979282  
Miami, FL 33197-9282

Huntington National Bank  
17 South High St.  
Columbus, OH 43215-3413

James R. Galehouse  
401 W. Tuscarawas Street NW  
Suite 400  
Canton, OH 44702-2045

Toby L. Rosen  
Toby L. Rosen, Trustee  
400 W Tuscarawas Street  
Citizens Bank Bldg. 4th Floor  
Canton, OH 44702-2044

Aultman Hospital  
2600 6th St SW  
Canton, OH 44710-1799

Ditech Financial  
PO Box 94710  
Palatine, IL 60094-4710

Navient  
P.O. Box 9500  
Wilkes Barre, PA 18773-9500

Jeffrey J. Null  
8955 Beatty St. NW  
Massillon, OH 44646-1275

End of Label Matrix  
Mailable recipients 13  
Bypassed recipients 0  
Total 13